## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10630260

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |                   |                                     |                     |                  |            | SMALL ENTITY TYPE   |                        |        | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|---|---|-------------------|-------------------------------------|---------------------|------------------|------------|---------------------|------------------------|--------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |   |   | 12                |                                     |                     |                  |            | RATE                | FEE                    | 1      | RATE                          | FEE                    |  |
| FOR   |   |   | NUMBER FILED      |                                     | NUMBER EXTRA        |                  |            | BASIC FEE           | 375.00                 | OR     | BASIC FEE                     | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | /12_minus 20=     |                                     | •                   |                  |            | X\$ 9=              |                        | OR     | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS  |   |   | 4 min             | nus 3 =                             | *1                  |                  |            | X42=                |                        | OR     | X84=                          | 86-                    |  |
| MU  | LTIPLE DEPEN  | IDENT CLAIM PI                            | RESENT            |                                     |                     |                  |            | +140=               |                        | OR     | +280=                         | 3 /                    |  |
| * If the difference in column 1 is less   |   |   |                   | ss than zero, enter "0" in column 2 |                     |                  |            | TOTAL               |                        | OR     | TOTAL                         | 834                    |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                          |   |   |                   |                                     |                     |                  | 1          | SMALL 6             | NTITY                  | OR     | OTHER<br>SMALL                |                        |  |
| AMENDMENT A   |   | CLAIMS REMAINING AFTER AMENDMENT          |                   | HIGH<br>NUM<br>PREVIO<br>PAID       | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE.               | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | .12                                       | Minus             | # 20                                | )                   | <del>-</del>     |            | X\$ 9= .            |                        | OR     | X\$18=                        |                        |  |
|   | Independent   | + <b>y</b>                                | Minus             | τ                                   |                     | <u> </u>         |            | X42=                |                        | OR     | X84=                          |                        |  |
|   | FIRST PRESE   | NTATION OF MI                             | ULTIPLE DEF       | PENDENI                             | CLAIM               |                  | J          | +140=               |                        | OR     | +280=                         |                        |  |
|   |   |   |                   |                                     |                     |                  |            | TOTAL<br>ADDIT, FEE | ,                      | OR     | TOTAL<br>ADDIT, FEE           |                        |  |
|   | •   |   | -DOM: 1 CC        |                                     |                     |                  |            |                     |                        |        |                               |                        |  |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVIO<br>PAID       | BER<br>OUSLY        | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus             | **                                  |                     | = .              |            | X\$ 9=              |                        | OR     | X\$18=                        |                        |  |
|   | Independent ,   |   | Minus             | ***                                 |                     | <u> -</u>        | <b>』</b> [ | X42=                |                        | OR     | X84=                          |                        |  |
| L   | FIRST PRESE   | NTATION OF MI                             | JLTIPLE DEP       | PENDENT                             | CLAIM               |                  | <b>.</b>   | +140=               |                        | OR     | +280=                         |                        |  |
|   |   |   |                   |                                     |                     |                  |            | TOTAL<br>ADDIT, FEE |                        | OR     | TOTAL<br>ADDIT. FEE           |                        |  |
| ADDIT. F (Column 1) (Column 2) (Column 3)   |   |   |                   |                                     |                     |                  |            |                     |                        |        | A0011.1 CE                    |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUMI<br>PREVIO<br>PAID      | BER<br>DUSLY        | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | •   | Minus .           | ##                                  |                     | =                | $\prod$    | X\$ 9=              |                        | OR     | X\$18=                        |                        |  |
|   | Independent   | *   | Minus             | ***                                 |                     | <u> </u>         | 1          | X42=                |                        | OR     | X84=                          |                        |  |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                   |                                     |                     |                  |            |                     |                        |        |                               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |                   |                                     |                     |                  |            | +140=<br>TOTAL      |                        | OR     | +280=                         |                        |  |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |                   |                                     |                     |                  |            |                     |                        |        | TOTAL<br>ADDIT. FEE           |                        |  |
|   | The "Highest Num  | nber Previously Pa                        | id For" (Total or | r Independ                          | ent) is the         | highest numb     | er fou     | nd in the app       | ropriate box           | in col | umin 1.                       |                        |  |